

# Phase II Reopening Face to Face Family Time Frequently Asked Questions (FAQs)

Below are responses to questions DCYF received regarding the reopening of *Face to Face Family Time*. Please refer to the *Face to Face Family Time* guidance documents for more information.

### Who Can Visit and When

- Q: When will Face to Face Family Time begin?
- A: Monday, June 1, 2020 in congruence with Phase II of the Governor's Reopening RI plan.
- Q: Why are we now accelerating plans to reopen all *Face to Face Family Time* in Week 2? I thought we were going slow?
- A: After sharing the original guidance documents with various stakeholders and receiving feedback, we decided to accelerate our plans for reinstituting **Face to Face Family Time**. Visitation is one of the core services of our child welfare system, and a vital component for reunification. As the state continues with its reopening plan, it is important that we safely provide children and families opportunities to connect with each other. We will continually assess how this process rolls out and will make adjustments as needed based on feedback and according to guidance from the Governor and the Rhode Island Department of Health.
- Q: Is the Department stopping *Virtual Family Time?*
- A: DCYF Case Managers, providers and foster families worked hard to transition to **Virtual Family Time** to help children and youth, in alternate living arrangements, maintain connections with their parents while we were adhering to the guidance from health officials. Video conferencing is an incredible tool for keeping children/youth and families connected. Going forward, DCYF will continue utilizing **Virtual Family Time** to supplement contact between parents and children/youth but **Virtual Family Time** will not be utilized as a substitute for **Face to Face Family Time**. DCYF encourages providers to do the same.
- Q: If parents are having unsupervised visits, when can they start visiting with their children?
- A: If a family was already having approved unsupervised visits prior to the pandemic, they can begin **Face to Face Family Time** again starting on June 1.
- Q: Is the Department going to supply masks, hand sanitizer, and wipes for those participating in visits (both staff and families)?
- A: It is expected that participants will utilize their own face mask or cloth face covering and hand sanitizer. However, if necessary, DCYF will provide these materials if needed. The Department will also provide disinfecting wipes for DCYF staff to clean state vehicles. DCYF staff can obtain these materials via their supervisor.
- Q: If the visit needs to be in a secure setting, can DCYF staff using their office buildings? Visits were sometimes previously held in the office buildings due to safety concerns and because there is security/police on site.

A: At this time, we are asking that visits not take place within DCYF's offices. We encourage the use of outdoor settings as much as possible. If a family needs assistance in finding a location for their **Face to Face Family Time**, they should work with their DCYF Case Management Team or provider. DCYF offices can be used for visits as a last resort, subject to prior approval by an administrator.

### Q: What is the visitation plan when weather does not permit outdoor visits, if we are not allowed to use the DCYF offices?

A: DCYF staff and/or providers should make every attempt to identify an appropriate indoor location to have a visit. Face to Face Family Time is always best, and less traumatizing for the children, when it is held in the community – in homes, parks and other natural settings. If there is a safety concern, DCYF offices can be used for visits as a last resort (subject to prior approval by an administrator).

## Q: Is it realistic to expect children between the ages of 2-10 to wear their face coverings for the entire visit? If the child will not comply, do we end the visit? If parents are not complying with social distancing or wearing masks during the visit, do we end the visit?

A: Staff must use common sense and professional judgement regarding this issue. During each phone call and health screening prior to the visit, staff should communicate the expectation that everyone (ages two and up) is required to wear a mask or cloth face covering at the visit. During these calls and health screenings, if a parent shares that they are not willing to wear a mask at the visit, the visit must be canceled. In these circumstances, DCYF staff should speak to their supervisor so an emergency motion can be filed with Family Court. At the visit, it is expected that some children/youth will not be willing to use a face covering during the visit. In addition, limited exceptions may be made for any adult whose use of masks/cloth face coverings would be damaging to their health or anyone who is developmentally unable to use these face coverings. Staff will not be put in the position to having to stop a visit for these reasons. You can address any health and safety issues with the parent after the visit.

### Q: Some staff have underlying conditions that put them at high risk. If a foster parent and fellow worker can't do the visit, does that staff member still do the visit?

A: For staff who have underlying health conditions, we need to continue to be flexible. Please speak to your supervisor and work together with your team as these challenges arise. We care deeply about everyone's safety and must work together as we navigate the reopening of **Face to Face Family Time**.

### Q: What if the child has an underlying medical condition?

A: For children and youth in DCYF care with health vulnerabilities, DCYF and/or provider staff will review with the family and foster family whether it is in the best interest of the child or youth to initiate Face to Face Family Time, with the goal of ensuring child and youth safety. In advance of this review, the DCYF Case Manager will consult with the child's or youth's Primary Care Physician to determine if Face to Face Family Time is advisable. The DCYF Case Manager and supervisor, in consultation with their Chief of Practice Standards, will make the final determination on Face to Face Family Time for children with underlying medical conditions.

### Q: Any guidelines for visitation if you have a parent that lives out of state, e.g., Massachusetts? Connecticut?

A: Starting in Phase II (June 1<sup>st</sup>), children placed out-of-state may participate in **Face to Face Family Time**, as the Governor's Phase II plans have lifted the 14-day quarantine requirement for out-of-state travel to states that no longer have a shelter in place order in effect.

- Q: When do visitation programs come into play?
- A: Visitation programs may be able to assist with supervision of **Face to Face Family Time** soon. We have notified our community partners of our current plan on reinstating family time for parents and children. We are working with our community providers to provide a mechanism for them to resume operations and we will notify staff once that is completed.
- Q: What happens if the state's COVID numbers increase? Do we put visits on hold again and go back to square one?
- A: The Governor and the Rhode Island Department of Health rely on a variety of data to advise them on the necessary level of social distancing and public health guidance our state requires. They will ultimately determine our actions, both as a Department and as a state.

### Visitation Policy and Communication

- Q: Can a DCYF visitation policy be developed to ensure we are all providing the same direction to parents re: visit expectations?
- A: Yes, the Department is drafting a revised Family Time (Visitation) DOP.
- Q: Safe and Secure Baby Court has multiple visits per week. Are the courts going to be flexible and sensitive to kinship placements during these phases?
- A: We have shared our guidance on resuming in-person family time with the Family Court. As always, we are required to comply with any court orders regarding visitation.
- Q: Are foster parents receiving notification of updated visitation guidance? Many feel left in the dark.
- A: Yes, foster families received notification of the updated **Face to Face Family Time** (Visitation) guidance.

#### Concerns with Beginning Face to Face Family Time (Visitation)

- Q: What happens when foster placement is saying that they do not feel safe with the child visiting due to knowing that parent has not taken this virus serious or following any set state protocols?
- A: During Week One, **Face to Face Family Time** will not occur if the kinship provider does not feel comfortable supervising the visit. Starting in Week 2 and beyond, the DCYF Case Manager or provider will have to develop a plan to facilitate **Face to Face Family Time**, if the foster family does not feel comfortable. Parents need to be able to see their children/youth.
- Q: Some of us have parents who have been saying on and off that they have COVID and/or are in quarantine. What is the guidance on that?
- A: The day before the **Face to Face Family Time** is scheduled, the DCYF Case Manager and/or a service provider who is facilitating the visit will contact each adult who will participate in the visit to verbally screen them using the <u>screening criteria</u> established by the Rhode Island Department of Health (RIDOH). The DCYF Case Manager and/or a service provider will review the screening criteria as it applies to the children/youth, with the foster parent or caregiver. If the screen is positive, (e.g., a symptom is present), **Face to Face Family Time** should be postponed until the screening criteria can be met or there is acceptable medical clearance or documentation. The day of **Face to Face Family Time** the individual facilitating the visit will review the same screening questions with each adult and child present for the visit and assure no individual has any <u>symptom</u> or associated risk of transmitting COVID-19. **Face to Face Family Time** should be postponed until the screening criteria can be met or there is acceptable medical clearance.

- Q: Is this contradictory to the Governor's guidance that we should remain with the same five people?
- A: For Phase II of the re-opening of RI, group size limits has been increased to 15 people.
- Q: If the Governor says that you should stick with 15 of the same people for social distancing, how are we supposed to manage visits with multiple people each day?
- A: There is a need for balance between the Governor's guidelines on social distancing and the fact that Face to Face Family Time is a core component of our child welfare work. It is important that each person involved in visits follows the guidelines, which includes health screenings, wearing masks or cloth face coverings, social distancing, washing or sanitizing your hands frequently, etc. Visits should be limited to only the children and parents, when possible, to minimize the number of people who are interacting at each visit.

Holding **Face to Face Family Time** during the COVID-19 pandemic will also require flexibility and creativity on the part of DCYF staff, providers and families. Now is the time to work together to engineer these visits in the best possible way for families and youth while prioritizing safety. This is also a good time to begin exploring shared parenting and other concepts with our foster families.

#### Logistics During a Visit

- Q: Who is going to be doing the health screenings?
- A: The day before the **Face to Face Family Time** is scheduled, the DCYF Case Manager and/or a service provider who is facilitating the visit will contact each adult who will participate in the visit to verbally screen them using the <u>screening criteria</u> established by the Rhode Island Department of Health (RIDOH). The DCYF Case Manager and/or a service provider will review the screening criteria as it applies to the children/youth, with the foster parent or caregiver. If the screen is positive, (e.g., a symptom is present), **Face to Face Family Time** should be postponed until the screening criteria can be met or there is acceptable medical clearance or documentation. The day of **Face to Face Family Time**, the individual facilitating the visit will review the same screening questions with each adult and child present for the visit and assure no individual has any <u>symptom</u> or associated risk of transmitting COVID-19. **Face to Face Family Time** should be postponed until the screening criteria can be met or there is acceptable medical clearance.
- Q: Health screening are supposed to be done the day before visits. Who is doing these for Monday visits if DCYF workers/providers are not working on Sundays?
- A: The expectation is that the worker/provider needs to do a health screening prior to the visit and whoever is facilitating the visit will conduct the health screening again at the time of the visit. For visits that fall on a Monday, you can conduct the first health screening via phone on Monday morning.
- Q: What happens if I can't reach a parent via phone to conduct a health screening and confirm their visit? Does the visit not happen?
- A: All visits have to be arranged and confirmed with the parent ahead of time. If you are not able to reach the parent to confirm the visit, the visit would not happen.
- Q: What if I don't trust that the adults are answering honestly on the health screening questions? Can I cancel the visit? I don't want to put myself or the youth at risk.
- A: No, you cannot cancel the visit unless there are obvious signs of illness. These are self-reported responses to the health screening questions. We always want to encourage good communication between staff and the family to try to understand the barriers that families are experiencing and try to solve these issues together. This is also an opportunity to remind families that the health screening and social distancing guidelines are there to keep everyone safe.

- Q: What is the approved medical clearance after someone reports being sick with COVID-19 and/or fails the health screening. A COVID test? A letter from their doctor?
- A: If someone fails the health screening, the visit can go forward if they submit documentation that they no longer pose a health risk. Documentation should be submitted to the DCYF Case Worker or supervisor.
- Q: Are we taking temperatures, and who is providing them if the worker/foster parents don't have a way to take them?
- A: No, temperature taking is not required as part of the health screening process for **Face to Face Family Time.**
- Q: Will relatives/kin have to conduct health screenings for parents when doing face-to-face visits?
- A: If a foster parent is supervising a visit, they will be responsible for conducting the health screening at the visit. The DCYF Case Manager and/or the service provider will conduct the initial health screening of all parties on the day before the visit.
- Q: How can six foot social distance occur for children under age 3?
- A: The guidance says to maintain social distancing as best as we can. For young children, it is challenging. Adults and children that are able, due to their age and/or understanding, should maintain six feet of distance from each other and wear a mask or cloth face covering. However, parents may hug their children.
- Q: Are parents expected to socially distance as well?
- A: Adults should be six feet apart from each other throughout the visit. However, parents may hug their children.
- Q: Are we providing parents with PPE if they don't have any?
- A: It is expected that participants will utilize their own face mask or cloth face covering and hand sanitizer. However, if necessary, DCYF will provide these materials if needed. DCYF staff can obtain these materials via their supervisor.
- Q: There are foster parents that have hostile, unsafe relationships with biological parents to the point that Facetime visits are supervised. How can we ask that they do a visit in-person?
- A: Families in this type of situation will not be asked to facilitate visitation and no face-to-face visits will occur during Week 1. During Week 2, staff or the provider will be responsible for developing an alternative plan to facilitate family time between the child and the parent safely.
- Q: It was noted in our previous meeting that day cares will not allow a child to be taken off-site and then brought back to the day care. This will greatly impact the available times to do visits for children who are in day care. How do we manage this?
- A: It is recommended that the DCYF Case Manager schedule Face to Face Family time visit either at the start of the day or at the end of the day to avoid the need to remove the child from day care. A child can always be brought to the day care provider after the visit or picked up at the day care provider early to facilitate the visit with the parent.
- Q: What about youth who are placed out of state?
- A: The Governor has lifted the travel restrictions (for states not currently under Stay at Home Orders) therefore children who are out of state are able to resume Face to Face Family Time as well. For youth placed in congregate/residential care, please confirm with the facility what their current Face to Face Family Time guidelines entail.

- Q: Access to restrooms in the community is very limited and this creates issues with children during visits. How are we supposed to manage this, especially if we are being encouraged to hold longer visits for some families?
- A: Staff and/or foster families should make every effort to ensure that children use the restroom prior to the visitation or choose a location that has facilities close by. Please follow your usual practice for community-based visits.

#### **Transportation for Visits**

- Q: For DCYF staff not all units have access to a CST; and, as stated before, there are not enough state vehicles. So, in this case, who is responsible for transport?
- A: We are strongly encouraging staff to utilize state vehicles for transports. Staff should speak to their supervisor if they are unable to secure a vehicle. Additionally, we have secured approval from the Department of Administration to rent up to 20 vehicles to support DCYF staff in transporting children and youth to and from Face to Face Family Time.
- Q: How are we following social distancing if we are expected to transport?
- A: Please review the guidance document for a comprehensive list of actions to take while transporting children/youth.
- Q: How are workers expected to transport 4 or 5 children?
- A: According to the Reopening Rhode Island guidance on transportation "drivers should limit occupancy to no more than two passengers per vehicle. Passengers must be of the same ride party. If not, then only one passenger per vehicle is permitted. However, the driver may waive the limit for members of the same household, if the vehicle can accommodate all riders in the back seat(s)."
- Q: For DCYF Staff Who is responsible for cleaning the vehicles?
- A: For state vehicles, the primary case worker or CST must wipe down vehicle surfaces after each ride with disinfectant. This includes, but is not limited to, high-touch surfaces such as door handles, seat belts, and armrests. Drivers must wear gloves when cleaning the vehicle and dispose of all cleaning materials such as wipes, gloves, etc.
- Q: For DCYF Staff Are we mandated to do a visit if the only option is to transport children in our personal cars?
- A: No one is mandated to transport in their personal vehicles. If anyone is uncomfortable, please speak to your supervisor to develop an alternative plan for transportation.
- Q: For DCYF Staff It feels as though sharing state cars would be against all the guidance we have received thus far from the Governor/DOH in regards to how the virus spreads.
- A: All of our **Face to Face Family Time** guidance has been approved by the Rhode Island Department of Health, including guidance related to transporting youth.